WELL SCHEDULE

FOR THE OFFICE OF LAND AND WATTER RESOURCES

Fips: <u>Ø15</u>
Well: <u>D50</u>2

Log No: _____

Recorded by:	Data Source:		Date:	7-22-02
County: <u>Carroll</u>	Permit No	o.: 12068	DOH No.:	
Quad: Drawning			Elevation: _/46	
1/4: 1/4:	1/4: <u>SE</u> 1/4:	SE Sec.: _/	9. T: 19N	R: 2E
	In field?			
Latitude:	Longitude:		GPS?	From quad?
Primary Aquifer: MRV	rA	_ Secondary Aquit	fer:	
Use: _ / R	Well status:	Local Well Name: _		
Owner: Charles L,	+William Legle	re		
	<u> </u>			
Date completed:	Driller:		Well depth: H	ole depth:
Pump type:	Power typ	e:	Pump capacity:	
Screen interval:	Screen length:		Screen diameter:	
	Screen length:			
	Casing length:			
	Casing length:			
nitial water level(ls):	Date:	Measuring po	int description:	1
Nater Quality Data?	Source:		Reliability:	
Nater Level Data?				
Pump Test Data?				·
Vater Use Data?			Reliability:	
		'à	•	

